

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Moving America Forward

ADDRESS (number and street)

500 Red Sail Way

☐Check if different  
than previously  
reported. (ACC)

Satellite Beach

FL

32937

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00375451

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☒July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Jennifer G. Mitchell

Signature of Treasurer

Electronically Filed by Jennifer G. Mitchell

Date

01

19

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

To add a bank charge and a credit card bill previously overlooked

Transaction ID :

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 34

Write or Type Committee Name  
Moving America Forward

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 1 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 3 | 0 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1  |                         | 14290.35                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 14290.35                |                                   |
| (c) Total Receipts (from Line 19) .....   | 44168.38                | 44168.38                          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....      | 58458.73                | 58458.73                          |
| 7. Total Disbursements (from Line 31) .....   | 48130.22                | 48130.22                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                 | 10328.51                | 10328.51                          |
| 9. Debts and Obligations owed TO<br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed BY<br>the committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name  
Moving America Forward

Report Covering the Period:

From:

|   |   |
|---|---|
| M | M |
| 0 | 1 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

To:

|   |   |
|---|---|
| M | M |
| 0 | 6 |

|   |   |
|---|---|
| D | D |
| 0 | 3 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other  |                               |                                   |
| Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | 15500.00                      | 15500.00                          |
| (ii) Unitemized .....  | 0.00                          | 0.00                              |
| (iii) TOTAL (add<br>Lines 11(a)(i) and (ii) .....  | 15500.00                      | 15500.00                          |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees<br>(such as PACs) .....   | 10880.18                      | 10880.18                          |
| (d) Total Contributions (add Lines<br>11(a)(iii),(b) and (c)) (Carry<br>Totals to Line 33, page 5) .....     | 26380.18                      | 26380.18                          |
| 12. Transfers From Affiliated/Other<br>Party Committees .....  | 17788.20                      | 17788.20                          |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures<br>(Refunds, Rebates, etc.)<br>(Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made<br>to Federal candidates and Other<br>Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts<br>(Dividends, Interest, etc.) .....  | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account<br>(from Schedule H3) .....  | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d),<br>12, 13, 14, 15, 16, 17, and 18(c)) .....                             | 44168.38                      | 44168.38                          |
| 20. Total Federal Receipts<br>(subtract Line 18(c) from Line 19) .....                                       | 44168.38                      | 44168.38                          |

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS  |          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|----------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |          |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |          |                               |                                   |
| (i) Federal Share.....   | 0.00     | 0.00                          |                                   |
| (ii) Non-Federal Share.....  | 0.00     | 0.00                          |                                   |
| (b) Other Federal Operating Expenditures.....  | 45630.22 | 45630.22                      |                                   |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤                        | 45630.22 | 45630.22                      |                                   |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00     | 0.00                          |                                   |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 2500.00  | 2500.00                       |                                   |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00     | 0.00                          |                                   |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00     | 0.00                          |                                   |
| 26. Loan Repayments Made.....  | 0.00     | 0.00                          |                                   |
| 27. Loans Made.....  | 0.00     | 0.00                          |                                   |
| 28. Refunds of Contributions To:   |          |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00     | 0.00                          |                                   |
| (b) Political Party Committees   | 0.00     | 0.00                          |                                   |
| (c) Other Political Committees (such as PACs) .....  | 0.00     | 0.00                          |                                   |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00     | 0.00                          |                                   |
| 29. Other Disbursements.....   | 0.00     | 0.00                          |                                   |
| 30. Federal Election Activity (2 U.S.C 431(20))  |          |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)  |          |                               |                                   |
| (i) Federal Share .....  | 0.00     | 0.00                          |                                   |
| (ii) "Levin" Share .....   | 0.00     | 0.00                          |                                   |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00     | 0.00                          |                                   |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 0.00     | 0.00                          |                                   |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 48130.22 | 48130.22                      |                                   |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 48130.22 | 48130.22                      |                                   |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 26380.18                      | 26380.18                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 26380.18                      | 26380.18                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 45630.22                      | 45630.22                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 45630.22                      | 45630.22                          |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Moving America Forward

**A.**

Full Name (Last, First, Middle Initial)

Berl Bernhard

Mailing Address 500 8th Street NW

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DLA Piper

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C5111191

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Mel Harris

Mailing Address 10800 Biscayne Blvd., Penthouse

City

Miami

State

FL

Zip Code

33161

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Preferred Employers Holdings

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 9

Transaction ID: C5105385

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Joel Jankowsky

Mailing Address 1333 New Hampshire Ave NW  
Ste 400

City

Washington

State

DC

Zip Code

20036-1500

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Akin Gump Strauss Hauer  
& Feld LLP

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 9

Transaction ID: C5116831

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

12000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

**A.**

Full Name (Last, First, Middle Initial)

Law Offices Of George R. Salem

Mailing Address 500 8th St., NW, Ste 210

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 6 / 2 0 0 9

Transaction ID: C5111528

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Joab M. Lesesne, III

Mailing Address 4904 - 35th Road North

City

Arlington

State

VA

Zip Code

22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Timmons & Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 9

Transaction ID: C5116830

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Evan Migdail

Mailing Address 7219 Delfield Street

City

Chevy Chase

State

MD

Zip Code

20815-4045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DLA Piper

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C5111193

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 / 34

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

Moving America Forward

**A.**

Full Name (Last, First, Middle Initial)

Andrew P. Wersel

Mailing Address 4337 Wilderness Way

City

Mason

State

OH

Zip Code

45040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catalina Marketing

Occupation

Executive VP

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 8 |   | 2 | 0 | 9 |   |

Transaction ID: C5116829

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

15500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 34

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

**A.**

Full Name (Last, First, Middle Initial)

AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION CO

Mailing Address 1333 New Hampshire Ave., NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C**

C00104901

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.18

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 9

Transaction ID: C5158535

Amount of Each Receipt this Period

380.18

\* In-Kind: Fundraising event food & bev

**B.**

Full Name (Last, First, Middle Initial)

DLA Pac

Mailing Address 1200 19th Street NW  
Suite 700

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C**

C00151340

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 9

Transaction ID: C5111194

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Mortgage Bankers Association Of America PAC

Mailing Address 1919 Pennsylvania Avenue NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C**

C00004812

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 9

Transaction ID: C5116832

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6380.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 34

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

**A.**

Full Name (Last, First, Middle Initial)

Real Estate Roundtable PAC

Mailing Address 1420 New York Avenue NW, Ste 1100

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C**

C00033779

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 9

Transaction ID: C5112907

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Union Pacific Corp. Fund For Effective Government

Mailing Address 600 13th St. NW, Suite 340

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C**

C00010470

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 9

Transaction ID: C5112962

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

10880.18

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 34

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

**A.**

Full Name (Last, First, Middle Initial)

Sunshine State PAC

Mailing Address 500 Red Sail Way

City

State

Zip Code

Satellite Beach

FL

32937

FEC ID number of contributing  
federal political committee.

**C**

C00457663

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

17788.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 6 / 2 0 0 9

Transaction ID: C5101993

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Sheet Metal Workers' International Association PAC

Mailing Address 1750 New York Avenue NW

City

State

Zip Code

Washington

DC

20006

FEC ID number of contributing  
federal political committee.

**C**

C00007542

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 6 / 2 0 0 9

Transaction ID: C5101992

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\*

**C.**

Full Name (Last, First, Middle Initial)

Sunshine State PAC

Mailing Address 500 Red Sail Way

City

State

Zip Code

Satellite Beach

FL

32937

FEC ID number of contributing  
federal political committee.

**C**

C00457663

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

17788.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 5 / 2 0 0 9

Transaction ID: C5103035

Amount of Each Receipt this Period

6153.27

**SUBTOTAL** of Receipts This Page (optional) .....

11153.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 34

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Carlos M. De La Cruz

Mailing Address 5 Harbor Pt

City

Key Biscayne

State

FL

Zip Code

33149-1715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CC1 CompaniesOccupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 3 / 2 0 0 9

Transaction ID: C5103060

Amount of Each Receipt this Period

400.00

[MEMO ITEM]

\*

B.

Full Name (Last, First, Middle Initial)

Reva Simkovic Hanzman

Mailing Address 2525 Ponce De Leon Blvd.

City

Coral Gables

State

FL

Zip Code

33134-6045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Retail Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 2 3 / 2 0 0 9

Transaction ID: C5103041

Amount of Each Receipt this Period

400.00

[MEMO ITEM]

\*

C.

Full Name (Last, First, Middle Initial)

Samuel A. Keesal, Jr.

Mailing Address 400 Oceangate  
14th Flr

City

Long Beach

State

CA

Zip Code

90802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Keesal Young & LoganOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 7 / 2 0 0 9

Transaction ID: C5103056

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

\*

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 34

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

**A.**

Full Name (Last, First, Middle Initial)

John Sayut

Mailing Address 1033 Brumpton PI

City

Rockledge

State

FL

Zip Code

32955

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health First

Occupation

Systems Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 4 / 2 0 0 9

Transaction ID: C5103064

Amount of Each Receipt this Period

1400.00

**[MEMO ITEM]**

\*

**B.**

Full Name (Last, First, Middle Initial)

Michael J. Trentalange

Mailing Address 777 S Harbour Island Blvd., Suite

City

Tampa

State

FL

Zip Code

33602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Trentalange & Kelley PA

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 7 / 2 0 0 9

Transaction ID: C5103057

Amount of Each Receipt this Period

2400.00

**[MEMO ITEM]**

\*

**C.**

Full Name (Last, First, Middle Initial)

Sunshine State PAC

Mailing Address 500 Red Sail Way

City

Satellite Beach

State

FL

Zip Code

32937

FEC ID number of contributing  
federal political committee.

C

C00457663

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17788.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 1 / 2 0 0 9

Transaction ID: C5103117

Amount of Each Receipt this Period

4334.93

**SUBTOTAL** of Receipts This Page (optional) .....

4334.93

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 34

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Moving America Forward

**A.**

Full Name (Last, First, Middle Initial)  
Comcast Corp. Political Action Committee

Mailing Address 1500 Market Street, 35th Floor

City State Zip Code  
Philadelphia PA 19102

FEC ID number of contributing  
federal political committee.

**C** C00248716

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 7 / 2 0 0 9

Transaction ID: C5103089

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\*

**B.**

Full Name (Last, First, Middle Initial)  
Sunshine State PAC

Mailing Address 500 Red Sail Way

City State Zip Code  
Satellite Beach FL 32937

FEC ID number of contributing  
federal political committee.

**C** C00457663

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17788.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 9

Transaction ID: C5103832

Amount of Each Receipt this Period

2300.00

**C.**

Full Name (Last, First, Middle Initial)  
Carlos M. De La Cruz

Mailing Address 5 Harbor Pt

City State Zip Code  
Key Biscayne FL 33149-1715

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CC1 Companies

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 0 / 2 0 0 9

Transaction ID: C5103833

Amount of Each Receipt this Period

2300.00

**[MEMO ITEM]**

\*

**SUBTOTAL** of Receipts This Page (optional) .....

2300.00

**TOTAL** This Period (last page this line number only) .....

17788.20

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|   |  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
|---|--|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION CO   | <b>Transaction ID:</b> D250630<br><b>Date of Disbursement</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| Mailing Address 1333 New Hampshire Ave., NW   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 2 | 3 |  | 2 | 0 | 9 |  |
| M   | M  | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |  |
| 0   | 6  |        | 2 | 3 |   | 2 | 0 | 9 |   |   |   |   |   |  |   |   |  |   |   |   |  |
| City Washington State DC Zip Code 20036   | <b>Amount of Each Disbursement this Period</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| Purpose of Disbursement Fundraising event food & bev<br>Candidate Name AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION CO   | <table border="1"> <tr> <td colspan="10">380.18</td> </tr> </table>  | 380.18 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| 380.18  |  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | * In-Kind Received   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>AT&T   | <b>Transaction ID:</b> D247754<br><b>Date of Disbursement</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| Mailing Address PO Box 8220   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 1 | 0 |  | 2 | 0 | 9 |  |
| M   | M  | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |  |
| 0   | 6  |        | 1 | 0 |   | 2 | 0 | 9 |   |   |   |   |   |  |   |   |  |   |   |   |  |
| City Aurora State IL Zip Code 60572-8220  | <b>Amount of Each Disbursement this Period</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| Purpose of Disbursement Phone<br>Candidate Name   | <table border="1"> <tr> <td colspan="10">100.84</td> </tr> </table>  | 100.84 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| 100.84  |  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 001<br>Category/Type   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>AT&T   | <b>Transaction ID:</b> D246833<br><b>Date of Disbursement</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| Mailing Address PO Box 8220   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 5 |  | 0 | 6 |  | 2 | 0 | 9 |  |
| M   | M  | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |  |
| 0   | 5  |        | 0 | 6 |   | 2 | 0 | 9 |   |   |   |   |   |  |   |   |  |   |   |   |  |
| City Aurora State IL Zip Code 60572-8220  | <b>Amount of Each Disbursement this Period</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| Purpose of Disbursement Phone<br>Candidate Name   | <table border="1"> <tr> <td colspan="10">111.79</td> </tr> </table>  | 111.79 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| 111.79  |  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 001<br>Category/Type   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |  |

**SUBTOTAL** of Disbursements This Page (optional) .....

592.81

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Auditech Associates, LLC  | <b>Transaction ID:</b> D246536<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 500 Red Sail Way   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 5 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 5   |         | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City State Zip Code<br>Satellite Beach FL 32937  | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Compliance Consulting<br>Candidate Name   | <table border="1"> <tr> <td colspan="10">3500.00</td> </tr> </table>  | 3500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 3500.00  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Auditech Associates, LLC  | <b>Transaction ID:</b> D241148<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 500 Red Sail Way   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 1   |         | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City State Zip Code<br>Satellite Beach FL 32937  | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Compliance Consulting<br>Candidate Name   | <table border="1"> <tr> <td colspan="10">3500.00</td> </tr> </table>  | 3500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 3500.00  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Auditech Associates, LLC  | <b>Transaction ID:</b> D242899<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 500 Red Sail Way   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 2   |         | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City State Zip Code<br>Satellite Beach FL 32937  | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Compliance Consulting<br>Candidate Name   | <table border="1"> <tr> <td colspan="10">3500.00</td> </tr> </table>  | 3500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 3500.00  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

10500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Auditech Associates, LLC  | <b>Transaction ID:</b> D243793<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 500 Red Sail Way   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 3   |         | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City State Zip Code<br>Satellite Beach FL 32937  | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Compliance Consulting<br>Candidate Name   | <table border="1"> <tr> <td colspan="10">3500.00</td> </tr> </table>  | 3500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 3500.00  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Auditech Associates, LLC  | <b>Transaction ID:</b> D244673<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 500 Red Sail Way   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 4   |         | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City State Zip Code<br>Satellite Beach FL 32937  | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Compliance Consulting<br>Candidate Name   | <table border="1"> <tr> <td colspan="10">3500.00</td> </tr> </table>  | 3500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 3500.00  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Auditech Associates, LLC  | <b>Transaction ID:</b> D247353<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 500 Red Sail Way   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 6   |         | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City State Zip Code<br>Satellite Beach FL 32937  | <b>Amount of Each Disbursement this Period</b>  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Compliance Consulting<br>Candidate Name   | <table border="1"> <tr> <td colspan="10">3500.00</td> </tr> </table>  | 3500.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 3500.00  |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

10500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>AWF Consulting, Inc.  | <b>Transaction ID:</b> D243673<br><b>Date of Disbursement</b>   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 426 C Street, NE   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M     | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 1 | 7 |  | 2 | 0 | 0 | 9 |
| M  | M   | /     | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 2   |       | 1 | 7 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Internet   | <table border="1"> <tr> <td colspan="10">53.06</td> </tr> </table>  | 53.06 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 53.06  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type   | 001   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>AWF Consulting, Inc.  | <b>Transaction ID:</b> D246541<br><b>Date of Disbursement</b>   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 426 C Street, NE   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M     | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 2 | 8 |  | 2 | 0 | 0 | 9 |
| M  | M   | /     | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 4   |       | 2 | 8 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Internet   | <table border="1"> <tr> <td colspan="10">53.06</td> </tr> </table>  | 53.06 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 53.06  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type   | 001   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>AWF Consulting, Inc.  | <b>Transaction ID:</b> D247352<br><b>Date of Disbursement</b>   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 426 C Street, NE   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M     | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /     | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 6   |       | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Internet   | <table border="1"> <tr> <td colspan="10">53.06</td> </tr> </table>  | 53.06 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 53.06  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type   | 001   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

159.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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|  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>BCTS  | <b>Transaction ID:</b> D244663<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 8265 N. Wickham Road   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 |  | 0 | 3 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 3   |        | 0 | 3 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Melbourne State FL Zip Code 32940   | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Computer repair   | <table border="1"> <tr> <td>290.38</td> </tr> </table>  | 290.38 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 290.38   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | Category/<br>Type   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Capitol Associates  | <b>Transaction ID:</b> D244666<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 426 - C Street NE  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 4   |        | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Rent  | <table border="1"> <tr> <td>229.82</td> </tr> </table>  | 229.82 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 229.82   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | Category/<br>Type   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Capitol Associates  | <b>Transaction ID:</b> D243789<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 426 - C Street NE  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 3   |        | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Rent & Utilities  | <table border="1"> <tr> <td>229.82</td> </tr> </table>  | 229.82 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 229.82   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | Category/<br>Type   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

750.02

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Capitol Associates  | <b>Transaction ID:</b> D242901<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 426 - C Street NE  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 2   |        | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Rent  | <table border="1"> <tr> <td>459.64</td> </tr> </table>  | 459.64 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 459.64   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type   | 001    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Capitol Associates  | <b>Transaction ID:</b> D241549<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 426 - C Street NE  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 |  | 0 | 5 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 1   |        | 0 | 5 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Rent & Utilities  | <table border="1"> <tr> <td>236.52</td> </tr> </table>  | 236.52 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 236.52   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type   | 001    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Capitol Associates  | <b>Transaction ID:</b> D241147<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 426 - C Street NE  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 1   |        | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Rent & Utilities  | <table border="1"> <tr> <td>223.13</td> </tr> </table>  | 223.13 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 223.13   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type   | 001    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

**919.29**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Capitol Associates   | <b>Transaction ID:</b> D247348<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 426 - C Street NE  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 6   |        | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Rent & Utilities   | <table border="1"> <tr> <td>229.82</td> </tr> </table>  | 229.82 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 229.82   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type   | 001    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Capitol Associates   | <b>Transaction ID:</b> D246537<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 426 - C Street NE  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 5 |  | 0 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 5   |        | 0 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20002  | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Rent   | <table border="1"> <tr> <td>229.82</td> </tr> </table>  | 229.82 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 229.82   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type   | 001    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Flik International   | <b>Transaction ID:</b> D247206<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 91337   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 5 |  | 2 | 2 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 5   |        | 2 | 2 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Chicago State IL Zip Code 60693-1337  | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Fundraising  | <table border="1"> <tr> <td>319.00</td> </tr> </table>  | 319.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 319.00   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>003</td> </tr> </table> Category/<br>Type   | 003    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 003  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

778.64

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|  |   |
|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>NGP Software, Inc.  | <b>Transaction ID:</b> D245324<br><b>Date of Disbursement</b>   |
| Mailing Address Mr. Nathaniel Pearlman<br>1101 Vermont Ave., NW, Suite 710   | <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/> |
| City Washington State DC Zip Code 20005  | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement Software<br>Candidate Name   | <input type="text" value="2250.00"/>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mr. Bennett Christian Robinson, Jr.   | <b>Transaction ID:</b> D246540<br><b>Date of Disbursement</b>   |
| Mailing Address 1616 18th St NW<br>Apt 507   | <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/> |
| City Washington State DC Zip Code 20009  | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement Fundraising Consultant<br>Candidate Name   | <input type="text" value="2975.00"/>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mr. Bennett Christian Robinson, Jr.   | <b>Transaction ID:</b> D247351<br><b>Date of Disbursement</b>   |
| Mailing Address 1616 18th St NW<br>Apt 507   | <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/> |
| City Washington State DC Zip Code 20009  | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement Fundraising Consulting<br>Candidate Name   | <input type="text" value="2975.00"/>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |

**SUBTOTAL** of Disbursements This Page (optional) .....

**8200.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

A.

Full Name (Last, First, Middle Initial)  
Mr. Bennett Christian Robinson, Jr.

Mailing Address 1616 18th St NW  
Apt 507

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Fundraising Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D241144

Date of Disbursement

01 / 01 / 2009

Amount of Each Disbursement this Period

2975.00

B.

Full Name (Last, First, Middle Initial)  
Mr. Bennett Christian Robinson, Jr.

Mailing Address 1616 18th St NW  
Apt 507

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Fundraising Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D242900

Date of Disbursement

02 / 01 / 2009

Amount of Each Disbursement this Period

2975.00

C.

Full Name (Last, First, Middle Initial)  
Mr. Bennett Christian Robinson, Jr.

Mailing Address 1616 18th St NW  
Apt 507

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Fundraising Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D243790

Date of Disbursement

03 / 01 / 2009

Amount of Each Disbursement this Period

2975.00

SUBTOTAL of Disbursements This Page (optional) .....

8925.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bennett Christian Robinson, Jr.

Mailing Address 1616 18th St NW  
Apt 507

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Fundraising Consultant

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D244669

Date of Disbursement

04 / 01 / 2009

Amount of Each Disbursement this Period

2975.00

**B.** Full Name (Last, First, Middle Initial)  
SunTrust

Mailing Address PO Box 3926

City Tallahassee State FL Zip Code 32315-3926

Purpose of Disbursement  
Bank charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D244143

Date of Disbursement

02 / 28 / 2009

Amount of Each Disbursement this Period

35.00

**C.** Full Name (Last, First, Middle Initial)  
SunTrust

Mailing Address PO Box 3926

City Tallahassee State FL Zip Code 32315-3926

Purpose of Disbursement  
Bank charges

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D243339

Date of Disbursement

01 / 31 / 2009

Amount of Each Disbursement this Period

203.95

**SUBTOTAL** of Disbursements This Page (optional) .....

3213.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>SunTrust<br><hr/> Mailing Address PO Box 3926   | <b>Transaction ID:</b> D246830<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>  | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 1 | 0 |  | 2 | 0 | 0 | 9 |
| M   | M   | / | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 4   |   | 1 | 0 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Tallahassee State FL Zip Code 32315-3926<br>Purpose of Disbursement Bank charge<br>Candidate Name<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div><br>Category/<br>Type<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  | <b>Amount of Each Disbursement this Period</b><br><div style="border: 1px solid black; padding: 5px; text-align: right;">35.00</div>  |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>SunTrust<br><hr/> Mailing Address PO Box 3926<br><hr/> City Tallahassee State FL Zip Code 32315-3926<br>Purpose of Disbursement Bank charge<br>Candidate Name<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div><br>Category/<br>Type<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> D246831<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <b>Amount of Each Disbursement this Period</b><br><div style="border: 1px solid black; padding: 5px; text-align: right;">35.00</div> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 |  | 1 | 0 |  | 2 | 0 | 0 | 9 |
| M   | M   | / | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 3   |   | 1 | 0 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>SunTrust<br><hr/> Mailing Address PO Box 3926<br><hr/> City Tallahassee State FL Zip Code 32315-3926<br>Purpose of Disbursement Bank Fee<br>Candidate Name<br><div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div><br>Category/<br>Type<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼    | <b>Transaction ID:</b> D248404<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <b>Amount of Each Disbursement this Period</b><br><div style="border: 1px solid black; padding: 5px; text-align: right;">35.00</div> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 5 |  | 1 | 0 |  | 2 | 0 | 0 | 9 |
| M   | M   | / | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 5   |   | 1 | 0 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**105.00**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|  |  |       |     |                   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
|--|--|-------|-----|-------------------|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--------|-----|-------------------|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>SunTrust<br><hr/> Mailing Address PO Box 3926  | <b>Transaction ID:</b> D260954<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>   | M     | M   | /                 | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 1 | 0 |  | 2 | 0 | 0 | 9 |        |     |                   |
| M  | M  | /     | D   | D                 | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| 0  | 6  |       | 1   | 0                 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| City Tallahassee State FL Zip Code 32315-3926<br>Purpose of Disbursement Bank charge<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  | <b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>35.00</td> </tr> </table><br><table border="1"> <tr> <td>001</td> </tr> <tr> <td>Category/<br/>Type</td> </tr> </table>  | 35.00 | 001 | Category/<br>Type |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| 35.00  |  |       |     |                   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| 001  |  |       |     |                   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| Category/<br>Type  |  |       |     |                   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Verizon<br><hr/> Mailing Address PO Box 17577<br><hr/> City Baltimore State MD Zip Code 21297-0513<br>Purpose of Disbursement Phone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼           | <b>Transaction ID:</b> D248405<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table><br><b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>170.03</td> </tr> </table><br><table border="1"> <tr> <td>001</td> </tr> <tr> <td>Category/<br/>Type</td> </tr> </table> | M     | M   | /                 | D | D | / | Y | Y | Y | Y | 0 | 5 |  | 1 | 3 |  | 2 | 0 | 0 | 9 | 170.03 | 001 | Category/<br>Type |
| M  | M  | /     | D   | D                 | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| 0  | 5  |       | 1   | 3                 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| 170.03   |  |       |     |                   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| 001  |  |       |     |                   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| Category/<br>Type  |  |       |     |                   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>SunTrust BankCard<br><hr/> Mailing Address PO Box 791250<br><hr/> City Baltimore State MD Zip Code 21279<br>Purpose of Disbursement SEE BELOW<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> D244833<br><b>Date of Disbursement</b><br><table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table><br><b>Amount of Each Disbursement this Period</b><br><table border="1"> <tr> <td>1.85</td> </tr> </table><br><table border="1"> <tr> <td>001</td> </tr> <tr> <td>Category/<br/>Type</td> </tr> </table>   | M     | M   | /                 | D | D | / | Y | Y | Y | Y | 0 | 3 |  | 3 | 0 |  | 2 | 0 | 0 | 9 | 1.85   | 001 | Category/<br>Type |
| M  | M  | /     | D   | D                 | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| 0  | 3  |       | 3   | 0                 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| 1.85   |  |       |     |                   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| 001  |  |       |     |                   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |
| Category/<br>Type  |  |       |     |                   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |        |     |                   |

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

206.88

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|   |   |
|---|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Postmaster<br>Mailing Address 212 Jackson Ave.  | <b>Transaction ID:</b> D244834<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 0 / 2 0 0 9</div> </div>   |
| City State Zip Code<br>Satellite Beach FL 32937<br>Purpose of Disbursement<br>Postage<br>Candidate Name<br><div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>   | <b>Amount of Each Disbursement this Period</b><br><div>1.85</div><br><b>[MEMO ITEM]</b>   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>SunTrust BankCard<br>Mailing Address PO Box 791250<br>City State Zip Code<br>Baltimore MD 21279<br>Purpose of Disbursement<br>SEE BELOW<br>Candidate Name<br><div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>               | <b>Transaction ID:</b> D246824<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 6 / 2 0 0 9</div> </div><br><b>Amount of Each Disbursement this Period</b><br><div>348.63</div>                      |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>Data-Alliance<br>Mailing Address 333 West Bradford Street<br>City State Zip Code<br>Nogales AZ 85621<br>Purpose of Disbursement<br>Computer equipment<br>Candidate Name<br><div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> | <b>Transaction ID:</b> D246828<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 5 / 2 0 0 9</div> </div><br><b>Amount of Each Disbursement this Period</b><br><div>92.95</div><br><b>[MEMO ITEM]</b> |

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**348.63**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

**A.**

Full Name (Last, First, Middle Initial)  
Earthlink, Inc.

Mailing Address 1375 Peachtree St.

City Atlanta State GA Zip Code 30309

Purpose of Disbursement  
Internet access

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D246827

Date of Disbursement

04 / 21 / 2009

Amount of Each Disbursement this Period

19.75

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
Office Depot

Mailing Address 243 E. Eau Gallie Blvd.

City Indian Harbour Bea State FL Zip Code 32937

Purpose of Disbursement  
Office equipment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D246829

Date of Disbursement

03 / 30 / 2009

Amount of Each Disbursement this Period

158.98

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
Staples

Mailing Address 3301 Jefferson Davis Hwy

City Alexandria State VA Zip Code 22305-3044

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D246826

Date of Disbursement

04 / 06 / 2009

Amount of Each Disbursement this Period

36.95

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Washington METRO  | <b>Transaction ID:</b> D246825<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 600 5th Street NW  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 0 | 6 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 4   |        | 0 | 6 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20001  | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Travel   | <table border="1"> <tr> <td colspan="10">40.00</td> </tr> </table>  | 40.00  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 40.00  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>002</td> </tr> </table> Category/<br>Type   | 002    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 002  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | <b>[MEMO ITEM]</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>SunTrust BankCard   | <b>Transaction ID:</b> D247369<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 791250  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 0 | 3 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 6   |        | 0 | 3 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Baltimore State MD Zip Code 21279   | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement SEE BELOW  | <table border="1"> <tr> <td colspan="10">139.95</td> </tr> </table>   | 139.95 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 139.95   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td></td> </tr> </table> Category/<br>Type  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | <b>[MEMO ITEM]</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Patrick Main Store  | <b>Transaction ID:</b> D247371<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 1500 South Patrick Drive   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 0 | 3 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 6   |        | 0 | 3 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Patrick State FL Zip Code 32925   | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Phone Purchase   | <table border="1"> <tr> <td colspan="10">59.95</td> </tr> </table>  | 59.95  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 59.95  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type   | 001    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | <b>[MEMO ITEM]</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

139.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>WMATA Express Vendor  | <b>Transaction ID:</b> D247370<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 600 5th St NW  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 0 | 3 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 6   |        | 0 | 3 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Washington State DC Zip Code 20001-2610   | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Travel   | <table border="1"> <tr> <td>80.00</td> </tr> </table>   | 80.00  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 80.00  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>002</td> </tr> </table> Category/<br>Type   | 002    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 002  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | <b>[MEMO ITEM]</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>SunTrust BankCard   | <b>Transaction ID:</b> D250258<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address PO Box 791250  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 3 | 0 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 6   |        | 3 | 0 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Baltimore State MD Zip Code 21279   | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement SEE BELOW  | <table border="1"> <tr> <td>290.87</td> </tr> </table>  | 290.87 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 290.87   |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>001</td> </tr> </table> Category/<br>Type   | 001    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 001  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | <b>[MEMO ITEM]</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>AmTrack   | <b>Transaction ID:</b> D250261<br><b>Date of Disbursement</b>   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address Penn Station   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> | M      | M | / | D | D | / | Y | Y | Y | Y | 0 | 6 |  | 2 | 1 |  | 2 | 0 | 0 | 9 |
| M  | M   | /      | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 6   |        | 2 | 1 |   | 2 | 0 | 0 | 9 |   |   |   |   |  |   |   |  |   |   |   |   |
| City New York State NY Zip Code 10001  | <b>Amount of Each Disbursement this Period</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement Travel   | <table border="1"> <tr> <td>24.00</td> </tr> </table>   | 24.00  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 24.00  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | <table border="1"> <tr> <td>002</td> </tr> </table> Category/<br>Type   | 002    |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 002  |   |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | <b>[MEMO ITEM]</b>  |        |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

**SUBTOTAL** of Disbursements This Page (optional) .....

290.87

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

|           |  |   |
|-----------|--|---|
| <b>A.</b> | <p>Full Name (Last, First, Middle Initial)<br/>Office Depot</p> <p>Mailing Address 1131 W. New Haven Ave.</p> <p>City Melbourne State FL Zip Code 32901</p> <p>Purpose of Disbursement<br/>Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>           | <p><b>Transaction ID:</b> D250264</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="98.54"/></p> <p><b>[MEMO ITEM]</b></p> |
| <b>B.</b> | <p>Full Name (Last, First, Middle Initial)<br/>Quick Messenger Service</p> <p>Mailing Address 4829 Fairmont Ave # 2</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement<br/>Delivery Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D250263</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p><b>[MEMO ITEM]</b></p> |
| <b>C.</b> | <p>Full Name (Last, First, Middle Initial)<br/>Staples</p> <p>Mailing Address 3301 Jefferson Davis Hwy</p> <p>City Alexandria State VA Zip Code 22305-3044</p> <p>Purpose of Disbursement<br/>Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>        | <p><b>Transaction ID:</b> D250260</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="63.33"/></p> <p><b>[MEMO ITEM]</b></p> |

**SUBTOTAL** of Disbursements This Page (optional) .....

**0.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 34

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
Moving America Forward

**A.**

Full Name (Last, First, Middle Initial)

Washington METRO

Mailing Address 600 5th Street NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D250262

Date of Disbursement

06 / 23 / 2009

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

Washington METRO

Mailing Address 600 5th Street NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D250259

Date of Disbursement

06 / 04 / 2009

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

45630.22

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 34

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Moving America Forward

A.

Full Name (Last, First, Middle Initial)

Friends Of Barbara Boxer

Mailing Address PO BOX 641751

City  
LOS ANGELES

State  
CA

Zip Code  
90064

Purpose of Disbursement  
Political Contribution

Candidate Name  
Barbara Boxer

Office Sought: ☐ House  
☒ Senate  
☐ President

State: CA

District:

Disbursement For:

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D248221

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

2500.00